CERCLA REMOVAL ACTION DAILY WORK ORDER



SITE NAME: Sweet Kleen Laundry

ORDER NO.: 20

SITE/SPILL NO.: UQ EPA REGION: II CONTRACTOR: WRS

MONITORS:

TO COMPLÉTION: 09/15/05

CONTRACT NO. EP-W-04-054

DATE: 06/06/2005 - 06/10/05

SHIFT: as needed OSC: Kevin Matheis WORK ORDER # 08

RM: Scott Soden

NUMBER OF PERSONNEL AUTHORIZED

1-RESPONSE MANAGER

1-FCA

2-Cleanup Tech

EQUIPMENT AND EXPENDABLE MATERIALS AUTHORIZED

During the mobilization phase of the project, equipment to be utilized will be on an as needed basis, equipment will be added to this work order until site infrastructure is established.

Anticipated	LIST
ITEM	

ITEM	QUANT.	ITEM	QUANT.
Computers	2	Office Trailer	1
4wd Truck	2	Break/Security Trailer	1
Passenger Car	1	Radios	6
Cellular phones	2	Storage trailer	1
Portable toilets	2		
Portable Fencing	1	200 series Excavator	1
Decontamination Trailer	1		

I CERTIFY THAT THE ABOVE WORK IS ORDERED AND AUTHORIZED BY THE CONTRACTOR IN THE PERFORMANCE OF THE ABOVE CITED TASK ORDER

SIGNATURE OF ON-SCENE COORDINATOR

Date 6/4/05

I ACKNOWLEDGE RECEIPT OF THIS WORK ORDER.

SIGNATURE OF CONTRACTOR'S REPRESENTATIVE

Date 4 6 55

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DESCRIPTION OF WORK TO BE PERFORMED

NOTE: All personnel work performed outside the site boundaries will be documented in an "OFF-SITE Hour Report" describing, in detail, activities performed and time charged in performance of these activities. Daily cost summary reports (1900-55) will also be submitted on a weekly basis unless provided daily, with the initiation of site activity. This item will be apply as long as the Task Order is open.

SPECIFIC TASKS

- 1. Provide site security during off-hours at site.
- 2. Begin waste disposal process. Solicit bids for disposal of various waste groups in advance of site mobilization.
- 3. Begin consolidation of wastes into segregated areas.
- 4. Coordinate removal of vehicles and tires.
- 5. Set up asbestos trailer and support zones.
- 6. Post warning signs as appropriate.
- 7. Clear and grub support zone area.
- 8. Other tasks as directed by the OSC.

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TO COMPLETION: 09/15/05			
AMENDMENTS			
I CERTIFY THAT THE ABOVE WORK IS ORDERED AND AUTHORIZED BY THE CONTRACTOR IN THE PERFORMANCE OF THE ABOVE CITED TASK ORDER Signatures only required on this page if amendments have occurred.			
SIGNATURE OF ON-SCENE COORDINATOR			
Date			
I ACKNOWLEDGE RECEIPT OF THIS WORK ORDER.			
SIGNATURE OF CONTRACTOR'S REPRESENTATIVE			
Date			